PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 CLAIMS AS FILED • PART I (Column 1) (Column 2) TOTAL CLAIMS FOR NUMBER FILED NUMBER EXTRA NUMBER EXTRA NUMBER FILED NUMBER EXTRA NULTIPLE DEPENDENT CLAIMS MILL ENTITY TYPE OR RATE FEE BASIC FEE 750.00 X\$ 9= OR X\$ 18= OR X\$ 42= OR X\$ 42= OR X\$ 44= OR TOTAL OR TOTAL CLAIMS REMAINING AFTER AMENDMENT AME
CLAIMS AS FILED - PART I (Column 1) (Column 2) SMALL ENTITY TYPE
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TOTAL CLAIMS FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS TOTAL TOTA
FOR NUMBER FILED NUMBER EXTRA BASIC FEE 375.00 OR BASIC FEE 750.00 TOTAL CHARGEABLE CLAIMS 7 minus 20= *
TOTAL CHARGEABLE CLAIMS 7 minus 20= *
INDEPENDENT CLAIMS minus 3 = MULTIPLE DEPENDENT CLAIM PRESENT *If the difference in column 1 is less than zero, enter "0" in column 2 *If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS AS AMENDED - PART II ADDI- CLAIMS HIGHEST PRESENT ADDI- ADI- ADDI- ADDI- ADDI- ADDI- ADDI- ADDI- ADDI- ADDI- ADDI-
MULTIPLE DEPENDENT CLAIM PRESENT *If the difference in column 1 is less than zero, enter "0" in column 2 *If the difference in column 1 is less than zero, enter "0" in column 2 *CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) *MALL ENTITY ADDI- ADDI- ADDI-
*If the difference in column 1 is less than zero, enter *0* in column 2 *If the difference in column 1 is less than zero, enter *0* in column 2 *If the difference in column 1 is less than zero, enter *0* in column 2 *CLAIMS AS AMENDED - PART II *CLAIMS AS AMENDED - PART II *CLAIMS AS AMENDED - PART II *CLAIMS HIGHEST NUMBER PRESENT *ADDI- *ADDI- *ADDI- *ADDI- **ADDI-
*If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS REMAINING REMAINING TOTAL OR TOTAL 7.50 OTHER THAN SMALL ENTITY ADDI- ADDI- ADDI-
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12.19-05 (Column 1) (Column 2) (Column 3)
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FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM TO STATE OF MULTIPLE DEPENDENT CLAIM
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ADDIT, FEE OR ADDIT, FEE
(Column 1) (Column 2) (Column 3)
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Independent • Minus ••• = X42= OR X84=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM A42° OR X84°
+140= OR +280=
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.
FORM PTD-675 (Rev. 1202) 148. Government Persing Ottos: 2003 — 499-278/8181 Patient and Trademark Office, U.S. DEPARTMENT OF COMMER